

**Department of Veterans Affairs**

**§ 4.87a**

whichever results in the higher numeral. That numeral will then be elevated to the next higher Roman numeral. Each ear will be evaluated separately.

(Authority: 38 U.S.C. 1155)

[64 FR 25209, May 11, 1999]

**§ 4.87 Schedule of ratings—ear.**

DISEASES OF THE EAR		DISEASES OF THE EAR—Continued	
	Rat- ing		Rat- ing
6200 Chronic suppurative otitis media, mastoiditis, or cholesteatoma (or any combination): During suppuration, or with aural polyps .....	10	Deformity of one, with loss of one-third or more of the substance .....	10
NOTE: Evaluate hearing impairment, and complications such as labyrinthitis, tinnitus, facial nerve paralysis, or bone loss of skull, separately.		6208 Malignant neoplasm of the ear (other than skin only) .....	100
6201 Chronic nonsuppurative otitis media with effusion (serous otitis media): Rate hearing impairment		NOTE: A rating of 100 percent shall continue beyond the cessation of any surgical, radiation treatment, antineoplastic chemotherapy or other therapeutic procedure. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based on that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter. If there has been no local recurrence or metastasis, rate on residuals.	
6202 Otosclerosis: Rate hearing impairment		6209 Benign neoplasms of the ear (other than skin only): Rate on impairment of function.	
6204 Peripheral vestibular disorders: Dizziness and occasional staggering .....	30	6210 Chronic otitis externa: Swelling, dry and scaly or serous discharge, and itching requiring frequent and prolonged treatment .....	10
Occasional dizziness .....	10	6211 Tympanic membrane, perforation of .....	0
NOTE: Objective findings supporting the diagnosis of vestibular disequilibrium are required before a compensable evaluation can be assigned under this code. Hearing impairment or suppuration shall be separately rated and combined.		6260 Tinnitus, recurrent .....	10
6205 Meniere's syndrome (endolymphatic hydrops): Hearing impairment with attacks of vertigo and cerebellar gait occurring more than once weekly, with or without tinnitus .....	100	NOTE (1): A separate evaluation for tinnitus may be combined with an evaluation under diagnostic codes 6100, 6200, 6204, or other diagnostic code, except when tinnitus supports an evaluation under one of those diagnostic codes.	
Hearing impairment with attacks of vertigo and cerebellar gait occurring from one to four times a month, with or without tinnitus .....	60	NOTE (2): Assign only a single evaluation for recurrent tinnitus, whether the sound is perceived in one ear, both ears, or in the head.	
Hearing impairment with vertigo less than once a month, with or without tinnitus .....	30	NOTE (3): Do not evaluate objective tinnitus (in which the sound is audible to other people and has a definable cause that may or may not be pathologic) under this diagnostic code, but evaluate it as part of any underlying condition causing it.	
NOTE: Evaluate Meniere's syndrome either under these criteria or by separately evaluating vertigo (as a peripheral vestibular disorder), hearing impairment, and tinnitus, whichever method results in a higher overall evaluation. But do not combine an evaluation for hearing impairment, tinnitus, or vertigo with an evaluation under diagnostic code 6205.			
6207 Loss of auricle: Complete loss of both .....	50		
Complete loss of one .....	30		

(Authority: 38 U.S.C. 1155)

[64 FR 25210, May 11, 1999, as amended at 68 FR 25823, May 14, 2003]

**§ 4.87a Schedule of ratings—other sense organs.**

	Rat- ing		Rat- ing
6275 Sense of smell, complete loss .....	10	NOTE: Evaluation will be assigned under diagnostic codes 6275 or 6276 only if there is an anatomical or pathological basis for the condition.	
6276 Sense of taste, complete loss .....	10		

## § 4.88

## 38 CFR Ch. I (7–1–11 Edition)

(Authority: 38 U.S.C. 1155)

[64 FR 25210, May 11, 1999]

### INFECTIOUS DISEASES, IMMUNE DISORDERS AND NUTRITIONAL DEFICIENCIES

## § 4.88 [Reserved]

### § 4.88a Chronic fatigue syndrome.

(a) For VA purposes, the diagnosis of chronic fatigue syndrome requires:

- (1) new onset of debilitating fatigue severe enough to reduce daily activity to less than 50 percent of the usual level for at least six months; and
  - (2) the exclusion, by history, physical examination, and laboratory tests, of all other clinical conditions that may produce similar symptoms; and
  - (3) six or more of the following:
    - (i) acute onset of the condition,
    - (ii) low grade fever,
    - (iii) nonexudative pharyngitis,
    - (iv) palpable or tender cervical or axillary lymph nodes,
    - (v) generalized muscle aches or weakness,
    - (vi) fatigue lasting 24 hours or longer after exercise,
    - (vii) headaches (of a type, severity, or pattern that is different from headaches in the pre-morbid state),
    - (viii) migratory joint pains,
    - (ix) neuropsychologic symptoms,
    - (x) sleep disturbance.
- (b) [Reserved]

[59 FR 60902, Nov. 29, 1994]

### § 4.88b Schedule of ratings—infectious diseases, immune disorders and nutritional deficiencies.

	Rating
6300 Cholera, Asiatic: As active disease, and for 3 months convalescence .....	100
Thereafter rate residuals such as renal necrosis under the appropriate system	
6301 Visceral Leishmaniasis: During treatment for active disease .....	100
NOTE: A 100 percent evaluation shall continue beyond the cessation of treatment for active disease. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter. Rate residuals such as liver damage or lymphadenopathy under the appropriate system.	
6302 Leprosy (Hansen's Disease): As active disease .....	100
NOTE: A 100 percent evaluation shall continue beyond the date that an examining physician has determined that this has become inactive. Six months after the date of inactivity, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter. Rate residuals such as skin lesions or peripheral neuropathy under the appropriate system.	
6304 Malaria: As active disease .....	100
NOTE: The diagnosis of malaria depends on the identification of the malarial parasites in blood smears. If the veteran served in an endemic area and presents signs and symptoms compatible with malaria, the diagnosis may be based on clinical grounds alone. Relapses must be confirmed by the presence of malarial parasites in blood smears. Thereafter rate residuals such as liver or spleen damage under the appropriate system	
6305 Lymphatic Filariasis: As active disease .....	100
Thereafter rate residuals such as epididymitis or lymphangitis under the appropriate system	
6306 Bartonellosis: As active disease, and for 3 months convalescence .....	100
Thereafter rate residuals such as skin lesions under the appropriate system	
6307 Plague: As active disease .....	100
Thereafter rate residuals such as lymphadenopathy under the appropriate system	
6308 Relapsing Fever: As active disease .....	100